
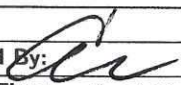
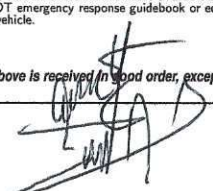


Date: Feb 27, 2024		<b>BILL OF LADING</b>		Page <u>1</u> of <u>1</u>		
<b>SHIP FROM</b> Name: Precise Mechanical Address: 2414 Black Gold City/State/Zip: Houston, TX 77073 SID#: _____ FOB: <input type="checkbox"/>			Bill of Lading Number: <u>00485151</u> 			
<b>SHIP TO</b> Name: CalEnergy Operating Corporation Address: 7030 Gentry Rd City/State/Zip: Calipatria, CA 92233 CID#: _____ FOB: <input type="checkbox"/>			<b>CARRIER NAME:</b> <u>EXPRESS LOGISTICS LLC.</u> Trailer number: _____ Seal number(s): _____ <b>SCAC:</b> _____ Pro number: _____			
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b> Name: CalEnergy Operating Corporation c/o Ardmore Power Address: 24610 Detroit Road Suite 1200 City/State/Zip: Westlake, OH 44145			<b>Freight Charge Terms:</b> <i>(freight charges are prepaid unless marked otherwise)</i> Prepaid _____ Collect _____ 3 <sup>rd</sup> Party <u>X</u> <input type="checkbox"/> (check box) Master Bill of Lading: with attached underlying Bills of Lading			
SPECIAL INSTRUCTIONS:						
<b>CUSTOMER ORDER INFORMATION</b>						
<b>CUSTOMER ORDER NUMBER</b>		<b># PKGS</b>	<b>WEIGHT</b>	<b>PALLET/SLIP</b> <small>(CIRCLE ONE)</small>	<b>ADDITIONAL SHIPPER INFO</b>	
184932		1	9000	Y <input checked="" type="radio"/> N <input type="radio"/>		
<b>GRAND TOTAL</b>		1	9000			
<b>CARRIER INFORMATION</b>						
<b>HANDLING UNIT</b>		<b>PACKAGE</b>		<b>WEIGHT</b>	<b>H.M.</b> (X)	<b>COMMODITY DESCRIPTION</b> <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC item 360</small>
<b>QTY</b>	<b>TYPE</b>	<b>QTY</b>	<b>TYPE</b>			
		1	PIECES	9000		vacuum pump
Received By: 						
Date / Time: <u>2-29-24 7:29</u>						
		1		9000	<b>GRAND TOTAL</b>	
<small>Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:          "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."</small>				<b>COD AMOUNT: \$</b> _____ <b>Fee Terms:</b> Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> <b>Customer check acceptable:</b> <input type="checkbox"/>		
<b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. §14706(c)(1)(A) and (B).</b>						
<small>RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.</small>				<small>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</small> _____ <b>Shipper</b>		
<b>SHIPPER SIGNATURE / DATE</b> <small>This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT</small>		<b>Trailer Loaded:</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		<b>Freight Counted:</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces		
<b>CARRIER SIGNATURE / PICKUP DATE</b> <small>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.</small>  <small>Property described above is received in good order, except as noted.</small>						